Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main Document Page 1 of 58

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Rogdrick First name D Middle name Wilson Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have		
	used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2366	

Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main Document Page 2 of 58

Case number (if known)

Debtor 1 Rogdrick D Wilson

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs If Debtor 2 lives at a different address: Where you live 5537 S Marshfield Ave Chicago, IL 60636 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

Entered 09/18/18 17:12:45 Desc Main Page 3 of 58 Case 18-26303 Doc 1 Filed 09/18/18

Document Case number (if known) Debtor 1 Rogdrick D Wilson

7.	The chapter of the Bankruptcy Code you are choosing to file under									
	onocomy to me under	☐ Chapter 7								
		☐ Cha	apter 11							
		☐ Cha	apter 12							
		■ Cha	apter 13							
8.	How you will pay the fee	_ a	about how yo	u may pay. Typically, if yo attorney is submitting you	ou are paying	the fee yourself,	you may pay with cash	r local court for more details n, cashier's check, or money h a credit card or check with		
						and attach the Application for Individuals to Pay				
			Ū	<i>ng Fee in Installments</i> (Official Form 103A). I t that my fee be waived (You may request this option only if you are filing for Chapter 7. By la						
		t a	out is not requ applies to you	uired to, waive your fee, a	nd may do so unable to pay	only if your incom the fee in install	me is less than 150% oments). If you choose	of the official poverty line that this option, you must fill out		
9. Have you filed for bankruptcy within the last 8 years?	□ No.									
		■ Yes								
			District	ilnbke	When	3/29/18	Case number	18-09279		
			District	ilnbke	 When	3/24/17	Case number	17-09311		
			District	See Attachment	When		Case number			
10.	Are any bankruptcy	■ No								
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes								
			Debtor				Relationship to y	/ou		
			District		When		Case number, if	known		
			Debtor				Relationship to y	/ou		
			District		When		Case number, if	known		
11.	Do you rent your residence?	■ No.	Go to li	ne 12.						
		☐ Yes	. Has yo	ur landlord obtained an ev	viction judgme	ent against you?				
				No. Go to line 12.						
				Yes. Fill out Initial Staten	nent About an	Eviction Judame	ent Against You (Form	101A) and file it as part of		

Debtor 1	Rogdrick D Wilson	Document	Page 4 01 58 Case number (if known)

Pari	Report About Any Bu	sinesses	You Owr	as a Sole Proprieto	r				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.					
		☐ Yes.	☐ Yes. Name and location of business						
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code						
	it to this petition.		Chec	k the appropriate box	to describe your business:				
				Health Care Busine	ss (as defined in 11 U.S.C. § 101(27A))				
				Single Asset Real E	Estate (as defined in 11 U.S.C. § 101(51B))				
				Stockbroker (as def	fined in 11 U.S.C. § 101(53A))				
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))				
				None of the above					
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	s. If you in is, cash-f i.C. 1116	ndicate that you are a low statement, and fed (1)(B).	ourt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure				
	For a definition of small	■ No.	I am i	not filing under Chapte	er 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am t Code		1, but I am NOT a small business debtor according to the definition in the Bankruptcy				
		☐ Yes.	I am i	iling under Chapter 1	1 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Part	Report if You Own or	Have Any	Hazardo	ous Property or Any	Property That Needs Immediate Attention				
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety?	■ No.	What is	the hazard?					
	Or do you own any property that needs immediate attention?			diate attention is why is it needed?					
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	Number, Street, City, State & Zip Code				
				·	, ,				

Debtor 1 Rogdrick D Wilson Page 5 of 58 Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Filed 09/18/18 Case 18-26303 Doc 1 Entered 09/18/18 17:12:45 Desc Main Document Page 6 of 58 Case number (if known) Debtor 1 Rogdrick D Wilson Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Rogdrick D Wilson

Rogdrick D Wilson Signature of Debtor 1

Executed on September 18, 2018

MM / DD / YYYY

Signature of Debtor 2

MM / DD / YYYY

Executed on

Debtor 1 Rogdrick D Wilson Page 7 of 58 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Thomas G. Stahulak Signature of Attorney for Debtor	Date	September 18, 2018 MM / DD / YYYY
Thomas G. Stahulak 6288620 Printed name		
Stahulak & Associates, L.L.C. / GetFiled		
53 W. Jackson Blvd., Suite 652 Chicago, IL 60604 Number, Street, City, State & ZIP Code		
Contact phone (312) 662-1480	Email address	ecf@stahulakandassociates.com
6288620 IL Bar number & State		<u> </u>

Debtor 1 Rogdrick D Wilson Page 8 of 58 Case number (if known)

Fill in this infor	rmation to identify your	case:		
Debtor 1	Rogdrick D Wilsor	1		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT OF ILLINOIS		
Case number				
(if known)				Check if this is ar
				amended filing

FORM 101. VOLUNTARY PETITION

Prior Bankruptcy Cases Filed Attachment

District	Case Number	Date Filed
ilnbke	18-09279	3/29/18
ilnbke	17-09311	3/24/17
ilnbke	16-27474	8/26/16
ilnbke	15-27296	8/10/15

		DOCUME	<u> </u>	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Rogdrick D Wilsor	1		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				Check if this is
				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Dar	t1: Summarize Your Assets		
rai	Outilitalize I vui Assets	Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	118,560.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	33,977.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	152,537.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	73,544.32
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	11,236.14
	Your total liabilities	\$	84,780.46
Par	t 3: Summarize Your Income and Expenses	-	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,369.21
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,739.21
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

Desc Main Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Case 18-26303 Document

Page 10 of 58 Case number (if known) Debtor 1 Rogdrick D Wilson

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	l
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	l

5,673.07

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

ill in this i	information to identify	your case and th	Document Page 11 of 58 his filing:		
Debtor 1	Rogdrick D V	Vilson			
Nalata a O	First Name	Middle	e Name Last Name		
ebtor 2 Spouse, if filing	g) First Name	Middle	e Name Last Name		
nited State	es Bankruptcy Court for	the: NORTHER	RN DISTRICT OF ILLINOIS		
Case numbe	er				☐ Check if this is an
					☐ Check if this is an amended filing
each catego	est. Be as complete and a If more space is needed, a	roperty escribe items. List	an asset only once. If an asset fits in more than one le. If two married people are filing together, both are heet to this form. On the top of any additional pages	e equally responsible f	or supplying correct
Part 1: Desc	cribe Each Residence, Bu	uilding, Land, or Ot	ther Real Estate You Own or Have an Interest In		
Do you ow	n or have any legal or eq	uitable interest in a	any residence, building, land, or similar property?		
□ No. Go t	to Part 2				
_	/here is the property?				
_ 100. 111	noro io uro proporty.				
	C Marchfield Ave		What is the property? Check all that apply		
5537 \$	S Marshfield Ave ddress, if available, or other des	cription	What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any se	red claims or exemptions. Put ecured claims on Schedule D: e Claims Secured by Property.
5537 Street ad	ddress, if available, or other des	60636-0000	■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land	the amount of any se Creditors Who Have Current value of the entire property?	ecured claims on Schedule D: Claims Secured by Property. Current value of the portion you own?
Street ad	ddress, if available, or other des		■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home	Current value of the entire property?	ecured claims on Schedule D: claims Secured by Property. Current value of the portion you own? \$118,560.00
5537 Street ad	ddress, if available, or other des	60636-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	Current value of the entire property? \$118,560. Describe the nature (such as fee simple a life estate), if known as fee state).	ecured claims on Schedule D: e Claims Secured by Property. Current value of the portion you own? S118,560.00 e of your ownership interest e, tenancy by the entireties, or
5537 Street ad	ddress, if available, or other des	60636-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only	Current value of the entire property? \$118,560. Describe the nature (such as fee simple	ecured claims on Schedule D: e Claims Secured by Property. Current value of the portion you own? S118,560.00 e of your ownership interest e, tenancy by the entireties, or
Street ad Chicae City	ddress, if available, or other des	60636-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	Current value of the entire property? \$118,560. Describe the nature (such as fee simple a life estate), if known Fee simple	ecured claims on Schedule D: e Claims Secured by Property. Current value of the portion you own? Standard Secured by Property. Example 118,560.00 The of your ownership interest expenses, tenancy by the entireties, or own.
Street ad Chicag City Cook	ddress, if available, or other des	60636-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another	Current value of the entire property? \$118,560. Describe the nature (such as fee simple a life estate), if kno Fee simple	ecured claims on Schedule D: e Claims Secured by Property. Current value of the portion you own? S118,560.00 e of your ownership interest e, tenancy by the entireties, or
Street ad Chicag City Cook	ddress, if available, or other des	60636-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property? \$118,560. Describe the nature (such as fee simple a life estate), if kno Fee simple	ecured claims on Schedule D: e Claims Secured by Property. Current value of the portion you own? Standard Secured by Property. Example 118,560.00 The of your ownership interest expenses, tenancy by the entireties, or own.

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Deb	tor 1	Case 18-2630 Rogdrick D Wilson		Filed 09/18/18 Document	Entered 09/18/ Page 12 of 58	/18 17:12:45	Desc	c Main
	_	s, trucks, tractors,		nicles motorcycles		oo namber (# wiewii)		
		s, trucks, tructors, t	sport dunity ver	noics, motorcycles				
	No							
	Yes							
3.1	Make:	RAM		Who has an interest in the	nronerty? Check one			
0.1	wano.	Truck 1500 Cre	ew Cab	_	broperty r officer office			ns or exemptions. Put claims on <i>Schedule D:</i>
	Model:			Debtor 1 only		Creditors Who Ha	ve Claims	Secured by Property.
	Year:	2013 simate mileage:	64,000	Debtor 2 only		Current value of t		Current value of the
		nformation:	64,000	☐ Debtor 1 and Debtor 2 c☐ At least one of the debtor		entire property?		portion you own?
				At least one of the debte	ors and another			
				Check if this is communicated (see instructions)	unity property	\$27,725	5.00	\$27,725.00
				n for all of your entries fr hat number here				\$27,725.00
Doy	ou own	ribe Your Personal an or have any legal o	or equitable int	ms erest in any of the follow	ing items?		po Do	rrent value of the rtion you own? not deduct secured ims or exemptions.
Е		: Major appliances, f		china, kitchenware				
	Yes. D	escribe						
								#0.000.00
		Use	ed personal ho	ousehold furniture and g	oods/items			\$3,000.00
E	l _{No}	: Televisions and rad		o, stereo, and digital equip edia players, games	oment; computers, printer	rs, scanners; music c	ollection	s; electronic devices
E		es of value :: Antiques and figuri other collections, n		orints, or other artwork; boolectibles	oks, pictures, or other art	objects; stamp, coin,	or base	ball card collections;
		escribe						
9. E (quipmer xamples	nt for sports and ho	ic, exercise, an	d other hobby equipment;	picycles, pool tables, golf	f clubs, skis; canoes a	and kaya	aks; carpentry tools;
	No Yes. D	escribe						
	•		tguns, ammunit	ion, and related equipment				
	No Yes D	Jescrihe						

Page 13 of 58
Case number (if known) Document Debtor 1 Rogdrick D Wilson 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe..... \$3.000.00 Used personal clothing and accessories 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$6,000.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Cash on hand \$25.00 Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... Checking and **PNC** \$200.00 Savings 17.1. Chicago Municipal Employees Cu \$25.00 Savings 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership:

Case 18-26303

Doc 1

Filed 09/18/18

Entered 09/18/18 17:12:45

Desc Main

De	ebtor 1	Rogdrick I	D Wilson	Docu	ıment	Page 1	L4 of 58	} Case number	(if known)	
	Govern Negotia	ment and co	orporate bonds and ents include persona ruments are those yo	I checks, cashiers	checks, pro	missory not	 nstrument es, and mo	ssoney orders.	(
	■ No	goliabic irist	raments are those yo	ou carriot transier	to someone	by signing	or activerii	ig tricin.		
		Give specific	information about th	nem						
	□ 1es. v	Oive specific	Issuer nam							
			ion accounts in IRA, ERISA, Keo	ogh, 401(k), 403(b)	, thrift saving	gs accounts	, or other p	ension or prof	it-sharing plan	s
		list sock soc	ount separately.							
	e res.	List each acc	Type of accou	unt:	Institution r	name:				
			401(k)					employer, Cit NDER VALU		\$1.00
22.	Your sl	hare of all un	and prepayments used deposits you h ents with landlords, p							or others
					Institution r	name or ind	ividual:			
	Annuiti ■ No	i es (A contra	ct for a periodic payr	ment of money to y	ou, either fo	r life or for a	a number o	f years)		
	☐ Yes		Issuer name and d	lescription.						
			ation IRA, in an acc 1), 529A(b), and 529		ed ABLE pro	ogram, or ι	ınder a qu	alified state t	uition progra	m.
	□ Yes		Institution name ar	nd description. Sep	arately file th	he records of	of any inter	rests.11 U.S.C	. § 521(c):	
	Trusts, ■ No	equitable o	r future interests in	property (other t	han anythir	ng listed in	line 1), an	d rights or po	owers exercis	sable for your benefit
	☐ Yes.	Give specific	information about the	hem						
26.			s, trademarks, trade domain names, web					ents		
	☐ Yes.	Give specific	information about the	hem						
27.			es, and other gener permits, exclusive lie		e associatio	n holdings,	liquor licer	nses, professio	nal licenses	
	☐ Yes.	Give specific	information about the	hem						
Mo	oney or p	oroperty ow	ed to you?							Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed t	to you							
	■ No	o								
	⊔ Yes. (ive specificی	information about th	nem, including whe	tner you alre	eady filed th	e returns a	ind the tax yea	rs	
29.		support bles: Past due	e or lump sum alimor	ny, spousal suppo	t, child supp	ort, mainter	nance, divo	orce settlement	t, property set	tlement
	■ No									
		Give specific	information							

De	ebtor 1	Rogdrick D Wilson	Document	Page 15 of 58 Case number (if known)	
30.		amounts someone ov ples: Unpaid wages, di		nefits, sick pay, vacation pay, workers' compe	nsation Social Security
	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		oans you made to someone else	ione, con pay, racation pay, tremete compe	induitin, Coolai Coodiniy
	■ No				
	☐ Yes.	Give specific informat	tion		
31.	Interes	sts in insurance polic	ies		
		oles: Health, disability,	or life insurance; health savings account ((HSA); credit, homeowner's, or renter's insural	nce
	□ No				
	■ Yes.		ompany of each policy and list its value. Company name:	Beneficiary:	Surrender or refund
			Company name.	beneficiary.	value:
			Term Life Insurance Policy through C Life Insurance - \$20,000.00 - NO CA	Global SH	
			SURRENDER VALUE	OI I	\$1.00
		-			
32	Any in	terest in property tha	t is due you from someone who has di	ed.	
32.				nsurance policy, or are currently entitled to rec	eive property because
		one has died.			
	■ No				
		Give specific informat	ion		
	.				
33.			s, whether or not you have filed a lawsu		
	■ No	, , , , , , , , , , , , , , , , , , ,	,		
	☐ Yes.	Describe each claim			
0.4	041				and off alabase
34.	■ No	contingent and unlique	uldated claims of every nature, including	g counterclaims of the debtor and rights to	set off claims
	_	Describe each claim			
	□ 165.	Describe each claim.			
35.		nancial assets you di	d not already list		
	■ No				
	☐ Yes.	Give specific informat	ion		
26		الموامد بحالية مطنا	of voir entries from Dort 4 including	ny antrias for name you have attached	
30			or your entries from Part 4, including a	ny entries for pages you have attached	\$252.00
Pa	rt 5: De	scribe Any Business-Re	elated Property You Own or Have an Interest	In. List any real estate in Part 1.	
27	Do you	own or have any legal o	r equitable interest in any business-related p	aronarty?	
	_ ′	o to Part 6.	equitable interest in any business-related p	noperty:	
	_	So to line 38.			
	□ 165. €	30 to line 30.			
Pa			ommercial Fishing-Related Property You Ow	n or Have an Interest In.	
	пу	ou own or have an interes	st in farmland, list it in Part 1.		
46.	Do you	ı own or have any leç	gal or equitable interest in any farm- or	commercial fishing-related property?	
	■ No.	Go to Part 7.			
	☐ Yes	. Go to line 47.			
Pa	rt 7:	Describe All Property	You Own or Have an Interest in That You Di	d Not List Above	
_					
53.			of any kind you did not already list? puntry club membership		
	■ No	ones. Couson noncis, of	canaly olds monibolonip		
	_	Give specific informati	on		

Entered 09/18/18 17:12:45 Desc Main Case 18-26303 Filed 09/18/18 Doc 1

Page 16 of 58

Case number (if known) Document Debtor 1 Rogdrick D Wilson 54. Add the dollar value of all of your entries from Part 7. Write that number here

04.	And the donar value of all of your challes from fair 7. White	· tilut			Ψ0.00
Part	List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$118,560.00
56.	Part 2: Total vehicles, line 5	_	\$27,725.00		
57.	Part 3: Total personal and household items, line 15		\$6,000.00		
58.	Part 4: Total financial assets, line 36		\$252.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+_	\$0.00		
62.	Total personal property. Add lines 56 through 61	_	\$33,977.00	Copy personal property total	\$33,977.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$152,537.00

Official Form 106A/B Schedule A/B: Property page 6

		17(1111)		
Fill in this infor	mation to identify your	case:		
Debtor 1	Rogdrick D Wilson	1		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	ount of the exemption you claim Specific	laws that allow exemption
	Copy the value from Schedule A/B	eck only one box for each exemption.	
5537 S Marshfield Ave Chicago, IL 60636 Cook County	\$118,560.00	\$15,000.00 735 ILC	CS 5/12-901
Primary Residence. Line from <i>Schedule A/B</i> : 1.1		100% of fair market value, up to any applicable statutory limit	
Used personal household furniture and goods/items	\$3,000.00	\$3,000.00 735 ILC	CS 5/12-1001(b)
Line from <i>Schedule A/B</i> : 6.1		100% of fair market value, up to any applicable statutory limit	
Used personal clothing and accessories	\$3,000.00	\$3,000.00 735 ILC	CS 5/12-1001(a)
Ellie Holli Govedale 772. TT.		100% of fair market value, up to any applicable statutory limit	
Cash on hand Line from Schedule A/B: 16.1	\$25.00	\$25.00 735 ILC	CS 5/12-1001(b)
Line Horr Schedule A.B. 10.1		100% of fair market value, up to any applicable statutory limit	
Checking and Savings: PNC Line from Schedule A/B: 17.1	\$200.00	\$200.00 735 ILC	CS 5/12-1001(b)
Ellic Hoff Goriedale Av.D. 17.1		100% of fair market value, up to any applicable statutory limit	

Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main Document Page 18 of 58

Rogdrick D Wilson Case number (if known) Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Savings: Chicago Municipal Employees 735 ILCS 5/12-1001(b) \$25.00 \$25.00 100% of fair market value, up to Line from Schedule A/B: 17.2 any applicable statutory limit 401(k): Retirement plan through old 735 ILCS 5/12-1006 \$1.00 \$1.00 employer, City of Chicago - NO CASH SURRENDER VALUE 100% of fair market value, up to Line from Schedule A/B: 21.1 any applicable statutory limit Term Life Insurance Policy through 215 ILCS 5/238 \$1.00 \$1.00 Global Life Insurance - \$20,000.00 - NO **CASH SURRENDER VALUE** 100% of fair market value, up to Line from Schedule A/B: 31.1 any applicable statutory limit Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main Document Page 19 of 58

	Document Pag	le 19 of 58		
Fill in this information to identify you	ır case:			
Debtor 1 Rogdrick D Wilso	on			
First Name	Middle Name Last N	ame	-	
Debtor 2 (Spouse if, filing) First Name	Middle Name Last N	ama	-	
(Spouse II, IIIIIg) I list Name		ame		
United States Bankruptcy Court for the	: NORTHERN DISTRICT OF ILLINOIS		_	
Case number				
(if known)			☐ Check	if this is an
			amend	led filing
Official Form 106D				
	. M/h = 11= Ole! C	al lass Durana and		
Schedule D: Creditors	Who Have Claims Sec	ured by Propert	<u>.</u>	12/15
	If two married people are filing together, both out, number the entries, and attach it to this f			
1. Do any creditors have claims secured b	y your property?			
☐ No. Check this box and submit t	his form to the court with your other schedu	ules. You have nothing else	to report on this form.	
■ Yes. Fill in all of the information	below.			
Part 1: List All Secured Claims				
	more than one secured claim, list the creditor sep	Column A	Column B	Column C
	s a particular claim, list the other creditors in Part		Value of collateral that supports this claim	Unsecured portion If any
2.1 Chrysler Capital	Describe the property that secures the clair	A	\$27,725.00	\$0.00
Creditor's Name	2013 RAM Truck 1500 Crew Cab Sport 4WD 64,000 miles			
	As of the date you file, the claim is: Check all	that		
PO BOX 961278	apply.	ıılat		
Fort Worth, TX 76161	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortgag	e or secured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset)	ase Money Security		
community debt				
Date debt was incurred 8/15/2013	Last 4 digits of account number	1000		
2.2 City of Chicago	Describe the property that secures the clair	n: \$1,037.00	\$118,560.00	\$0.00
Creditor's Name	5537 S Marshfield Ave Chicago, IL			
Department of Rev - Water	60636 Cook County			
Division	Primary Residence.			
P.O. Box 6330	As of the date you file, the claim is: Check all apply.	that		
Chicago, IL 60680	☐ Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Miles aures the debt2 Obselvers	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		e or secured		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		lion)		
☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's ☐ Judgment lien from a lawsuit	11011)		
☐ Check if this claim relates to a community debt		Purchase Money Security		
Date debt was incurred	Last 4 digits of account number	5712		
- a.c dost mac mounted	East - argits or account number	/		

Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main Document Page 20 of 58

Debtor 1 Rogdrick D Wilson	Case number (if know)				
First Name Middle N	Name Last Name				
2.3 Internal Revenue Service	Describe the property that secures the claim:	\$25,235.28	\$118,560.00	\$0.00	
Creditor's Name PO Box 7317 Central Insolvency Operations Philadelphia, PA 19101-7346 Number, Street, City, State & Zip Code	5537 S Marshfield Ave Chicago, IL 60636 Cook County Primary Residence. As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated			V 2 2 2	
Who owes the debt? Check one.	■ Disputed Nature of lien. Check all that apply.				
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	An agreement you made (such as mortgage or car loan) Statutory lien (such as tax lien, mechanic's lien)				
At least one of the debtors and another	☐ Judgment lien from a lawsuit	1			
☐ Check if this claim relates to a community debt	9	chase Money Security			
Date debt was incurred	Last 4 digits of account number				
If this is the last page of your form, add Write that number here:	· -	\$73,544 \$73,544			
trying to collect from you for a debt you of	be notified about your bankruptcy for a debt that yowe to someone else, list the creditor in Part 1, an at you listed in Part 1, list the additional creditors h	d then list the collection age	ncy here. Similarly, if you h	nave more	
Name, Number, Street, City, State & City of Chicago Dept of Reve 333 S. State St. #330 PO Box 6330 Chicago, IL 60680	enue Wat	which line in Part 1 did you ente			
Name, Number, Street, City, State & Internal Revenue Service PO Box 7346 * Philadelphia, PA 19101	5	which line in Part 1 did you ente	er the creditor? 2.3		

		Document	Page 21 of 58		
Fill in this infor	mation to identify your c	ase:			
Debtor 1	Rogdrick D Wilson				
	First Name	Middle Name	Last Name	-	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
Hairad Oraca B	and more than Oracle to make	NODTHERN DISTRICT OF II	LINOIC		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS	-	
Case number					
(if known)				_ c	heck if this is an
				a	mended filing
Official For	m 106E/E				
		ho Have Unsecured	Claims		12/15
			TY claims and Part 2 for creditors with	NONDRIODITY -I-	
schedule G: Exect schedule D: Credi eft. Attach the Co ame and case nu	utory Contracts and Unexpiritors Who Have Claims Secuntinuation Page to this page imber (if known).	red Leases (Official Form 106G). I red by Property. If more space is s. If you have no information to re	list executory contracts on Schedule A Do not include any creditors with partia needed, copy the Part you need, fill it o eport in a Part, do not file that Part. On t	ally secured claims out, number the ent	that are listed in ries in the boxes on the
	All of Your PRIORITY Uns				
	tors have priority unsecured	claims against you?			
No. Go to	Part 2.				
Yes.					
Part 2: List A	All of Your NONPRIORITY	/ Unsecured Claims			
3. Do any credi	tors have nonpriority unsecu	ured claims against you?			
☐ No. You h	ave nothing to report in this pa	rt. Submit this form to the court with	your other schedules.		
Yes.					
unsecured cla	im, list the creditor separately	for each claim. For each claim lister	he creditor who holds each claim. If a cr d, identify what type of claim it is. Do not li have more than three nonpriority unsecur	st claims already inc	luded in Part 1. If more
					Total claim
4.1 Antero	Capital LLC	Last 4 digits of acc	count number		\$648.36
•	ty Creditor's Name	When we the deb	4 in a comp 10		
PO BO Burling	x 1931 ame, CA 94011	When was the deb	ot incurred?		
	Street City State Zlp Code	As of the date you	file, the claim is: Check all that apply		
Who inc	urred the debt? Check one.				
■ Debto	or 1 only	☐ Contingent			
☐ Debto	or 2 only	☐ Unliquidated			
☐ Debto	or 1 and Debtor 2 only	☐ Disputed			
☐ At lea	st one of the debtors and anot	ther Type of NONPRIO	RITY unsecured claim:		
	k if this claim is for a comm				
debt		☐ Obligations arisi	ng out of a separation agreement or divor	ce that you did not	
_	aim subject to offset?	report as priority cla		1.16	
No		☐ Debts to pension	n or profit-sharing plans, and other similar	aepts	
☐ Yes		Other. Specify	CLAIM FOR CONTINENTAL FINANCE/VERVE		

Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main Document Page 22 of 58

Debio	Rogarick D Wilson	Case number (if know)	
4.2	Cambridge Capital Solution	Last 4 digits of account number	\$1.00
	Nonpriority Creditor's Name 28241 Crown Valley Pkwy Ste F403	When was the debt incurred?	
	Laguna Niguel, CA 92677		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	☐ Yes	■ Other. Specify NOTICE ONLY	
4.3	Capital One Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$366.31
	PO Box 6492	When was the debt incurred?	
	Carol Stream, IL 60197		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card CLAIM	
4.4	Chase Bank	Last 4 digits of account number	\$1.00
7.7	Nonpriority Creditor's Name		Ψ1.00
	National Payment Services PO BOX 182223- Dept OH1-1272	When was the debt incurred?	
	Columbus, OH 43218		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	· · · · · · · · · · · · · · · · · · ·	
	⊔ Yes	■ Other. Specify NOTICE ONLY	

Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main Document Page 23 of 58

Debto	or 1 Rogdrick D Wilson	Case number (if know)	
4.5	City of Chicago *	Last 4 digits of account number	\$1,386.11
	Nonpriority Creditor's Name Department of Finance P.O Box 88292 Chicago, IL 60680-1292	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify CLAIM	
4.6	Commonwealth Edison Nonpriority Creditor's Name	Last 4 digits of account number 8027	\$277.00
	1919 SWIFT DR CLAIMS & COLLECTIONS	When was the debt incurred?	
	Oak Brook, IL 60523 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	•	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify <u>utility</u>	
4.7	Directv	Last 4 digits of account number	\$1.00
	Nonpriority Creditor's Name PO BOX 9001069	When was the debt incurred?	
	Louisville, KY 40290 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	□ res	■ Other. Specify Service	

Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main Document Page 24 of 58

Debto	or 1 Rogdrick D Wilson	Case number (if know)	
4.8	Enterprise Rent-A-Car Nonpriority Creditor's Name	Last 4 digits of account number	\$1.00
	PO BOX 405738	When was the debt incurred?	
	Atlanta, GA 30384 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify NOTICE ONLY	
4.9	Ford Credit Nonpriority Creditor's Name	Last 4 digits of account number	\$1.00
	Bankruptcy Dept P.O. Box 542000 Omaha, NE 68154-8000	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify NOTICE ONLY	
4.1	IL Dept of Employment Security	Last 4 digits of account number 7189	\$822.00
<u> </u>	Nonpriority Creditor's Name 33 S State St 8th Flr Benefit Payment Control	When was the debt incurred?	· · · · · · · · · · · · · · · · · · ·
	Chicago, IL 60603 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam is. Oneok an that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify overpayment	

Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main Document Page 25 of 58

Rogarick D Wilson	Case number (if know)	
MIDLAND FUNDING□	Last 4 digits of account number	\$959.18
Nonpriority Creditor's Name PO BOX 2011	When was the debt incurred?	·
Warren, MI 48090		
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
■ Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify CLAIM FOR CREDIT ONE BANK	
Northwestern Hospital	Last 4 digits of account number	\$1.00
Nonpriority Creditor's Name		*****
251 E. Huron	When was the debt incurred?	
Chicago, IL 60611	As of the date year file, the claim in Observation that seek	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	Поло	
	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other Specify medical	
People's Gas Light & Coke	Last 4 digits of account number	\$272.55
Nonpriority Creditor's Name	When was the debt incurred?	
200 E Randolph St Chicago, IL 60601	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify CLAIM	
■ res	■ Other, Specify OLATIVI	

Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main Document Page 26 of 58

Debt	or 1 Rogdrick D Wilson	Case number (if know)	
4.1 4	St Anthony Hospital	Last 4 digits of account number	\$1.00
•	Nonpriority Creditor's Name 2875 West 19th Street	When was the debt incurred?	·
	Chicago, IL 60623 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical	
4.1	T-Mobile/T-Mobile USA INC	Last 4 digits of account number	\$1,175.97
5	Nonpriority Creditor's Name		Ψ1,110.01
	%American Infosource LP PO Box 248848	When was the debt incurred?	
	Oklahoma City, OK 73124 Number Street City State Zlp Code	As of the date year file, the plains in Check all that cooks	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	Пол	
		Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify CLAIM	
4.1 6	University Eye Specialists	Last 4 digits of account number	\$1.00
<u> </u>	Nonpriority Creditor's Name 676 N St Clair, Ste 1500	When was the debt incurred?	
	Chicago, IL 60611 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Offeck all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	□ 169	■ Other. Specify medical	

Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main Document Page 27 of 58 Case number (if know) Debtor 1 Rogdrick D Wilson 4.1 USA Title Loans/Title Lenders \$5,320.66 Last 4 digits of account number Nonpriority Creditor's Name 790 Estate Dr, Suite 100 When was the debt incurred? Deerfield, IL 60015 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts DEFICIENCY CLAIM FOR 2006 SATURN ☐ Yes Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? American InfoSource LP Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 71083 Part 2: Creditors with Nonpriority Unsecured Claims Charlotte, NC 28272 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address American InfoSource LP as agent for Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims DIRECTV, LLC Part 2: Creditors with Nonpriority Unsecured Claims PO Box 51178 Los Angeles, CA 90051 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Arnold Scott Harris, P.C. Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 111 W Jackson Blvd, Suite 600 Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60604 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Chicago Department of Revenue Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 121 N. Lasalle Street Part 2: Creditors with Nonpriority Unsecured Claims Room 107A Chicago, IL 60602 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Goldman and Grant Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 205 W Randolph Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60606 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?

Name and Address
IL Dept of Employment Security
PO Box 4385

600 W. Jackson Blvd #400

Harris & Harris

Official Form 106 E/F

Chicago, IL 60661

PO Box 4385 Chicago, IL 60680 On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.10 of (Check one):

Part 1: Creditors with Priority Unsecured Claims

☐ Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Last 4 digits of account number

Line 4.5 of (Check one):

Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main Document Page 28 of 58

Case number (if know) Debtor 1 Rogdrick D Wilson Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? IL Dept of Employment Security Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 28542 NETWORK PL Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60673 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? IL Dept of Employment Security Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 19509 Part 2: Creditors with Nonpriority Unsecured Claims Springfield, IL 62794 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Linebarger Goggan Blair & Sampson Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 06152 ■ Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60606 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Northwestern Medical Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 38693 Eagle Way ■ Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60678 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? PRA Receivables Management, LLC Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO BOX 12914 Part 2: Creditors with Nonpriority Unsecured Claims Norfolk, VA 23541 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Secretary of State Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Part 2: Creditors with Nonpriority Unsecured Claims

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				-	Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$	0.00
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	\$	11,236.14
		here.		Ψ	. 1,200.11
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	11,236.14
		·			,,

Last 4 digits of account number

Compliance Dept

2701 S Dirksen Pkwy Springfield, IL 62723

		120000		
Fill in this infor	mation to identify your	case:		
Debtor 1	Rogdrick D Wilson	Niddle Name	Last Name	
Debtor 2	i iist Namo	Middle Name	Last Hamo	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the c	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3	<u> </u>		<u> </u>		
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	0.1.5		0.0.0	2.1. 0000	
2.4	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	- ity		Cidio		

		Docume	<u>nt Pade 30 d</u>	ากรห	
Fill in this	information to identify your				
Debtor 1	Rogdrick D Wilsor	1			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	rg) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
	, ,				
Case numb (if known)	per				☐ Check if this is an
					amended filing
Official	Form 106H				
	ule H: Your Cod	ahtors			12/15
Scried	ule II. Toul Cou	CDIOIS			12/15
our name	and case number (if known you have any codebtors? (if). Answer every question		, 0	p of any Additional Pages, write
■ Na					
■ No □ Yes					
	nin the last 8 years, have you a, California, Idaho, Louisiana				ty states and territories include
■ No.	Go to line 3.				
☐ Yes.	. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form 1	2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed t	ng with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lir	ne
	Name			□ Schedule E/F,	
				☐ Schedule G, lir	ne
	Number Street			<u> </u>	
	City	State	ZIP Code		
3.2				☐ Schedule D, lir	
	Name			□ Schedule E/F,	
				☐ Schedule G, lir	
1	Number Street			_	
(City	State	ZIP Code		

Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main Document Page 31 of 58

Fill	in this information t	to identify your ca	ase:								
Del	btor 1	Rogdrick D V	Vilson								
	btor 2 buse, if filing)										
Uni	ited States Bankrup	otcy Court for the	NORTHERN DISTRIC	T OF ILLINOIS		_					
	se number nown)						□ An		d filing ent showing	g postpetition	chapter
O	fficial Form	106l					M	Л / DD/ Y	YYY	· ·	
S	chedule I:	Your Inco	ome					.,, 00, 1			12/15
sup spo atta	plying correct info use. If you are sep ch a separate she	ormation. If you parated and you	sible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, and you	our spouse include infor	is livi matio	ng with y n about y	ou, incli our spo	ude inform ouse. If mo	nation about ore space is	your needed,
1.	Fill in your empl	oyment		Debtor 1				Debtor 2	or non-fil	ling spouse	
	If you have more	•	Employment status	■ Employed				☐ Emplo	oyed		
	attach a separate information about		Employment status	☐ Not employ	red			□ Not e	mployed		
	employers.		Occupation	truck driver							
	Include part-time, self-employed wo		Employer's name	Staffing Sour	ce Personn	nel Ind	<u> </u>				
	Occupation may or homemaker, if		Employer's address	Driversource 15340 Michig Dearborn, MI	gan Ave						
			How long employed the	here? 2 1/	2 mths						
Par	rt 2: Give De	tails About Mon	thly Income								
	mate monthly incouse unless you are		ate you file this form. If y	you have nothing	to report for	any li	ne, write	\$0 in the	space. Inc	clude your nor	n-filing
	ou or your non-filing e space, attach a se		ore than one employer, co this form.	ombine the inform	nation for all e	emplo	yers for th	nat perso	n on the lir	nes below. If y	ou need
							For Debt	or 1		otor 2 or ng spouse	
2.			ry, and commissions (be calculate what the monthly		. 2.	\$_	5,6	673.07	\$	N/A	
3.	Estimate and lis	t monthly overti	me pay.		3.	+\$_		0.00	+\$	N/A	
4.	Calculate gross	Income. Add lin	ne 2 + line 3.		4.	\$	5,673	3.07	\$	N/A	

Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main Document Page 32 of 58

Copy line 4 here	Debt	tor 1	Rogdrick D Wilson	_	(Case	number (if known)	_				
Copy line 4 here												
5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5d. Voluntary contributions for retirement fund loans 5d. Voluntary contributions for the fund forms 5d. Voluntary contributions for the fund forms 5d. Voluntary contributions 5d. Voluntary contributi						Fo	r Debtor 1					
5a. Tax, Medicare, and Social Security deductions 5a. \$ 1,303.86 \$ N/A		Cop	y line 4 here	4.		\$_	5,673.07	_	\$		N/A	<u> </u>
55. Mandatory contributions for retirement plans 50. \$ 0.00 \$ N/A	5.	List	all payroll deductions:									
55. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5c. Insurance 5c. Nomestic support obligations 5c. Insurance 5c. Solution (1988) 5c. Union dues 5c. Insurance 5c. Voluntary Contributions (1988) 5c. V		5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	1.303.86		\$		N/A	
5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5f. So. So. 0.000 \$ N/A 5g. Union dues 5g. Union dues 5g. Union dues 5h. Other deductions. Specify: 5h. * \$ 0.000 \$ N/A 5h. Other deductions. Specify: 5h. * \$ 0.000 \$ N/A 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1,303.86 \$ N/A 5h. Other income regularly receives 8p. Vision in the statement for each property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly retirement and dividends 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive linctude altimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. Social Security 8d. Other government assistance that you regularly receive linctude cash assistance and the value (if known) of any non-cash assistance hat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8g. Pension or retirement income 8g. Pension or retirement income 8h. Other government income. Add line 7 + line 9. 10. Calculate monthly income. Specify: 8f. Add all other recompliance and the value (if known) of any non-cash assistance hat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8g. Pension or retirement income 8h. Other monthly income. Specify: 8f. Add all other recompliance and the value (if known) of any non-cash assistance hat you receive such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8g. Pension or retirement income 8h. Other monthly income. Specify: 8g. Pension or retirement income 9h. Other monthly income. Specify: 8g. Pension or retirement income 9h. Other monthly income. Specify: 9h. Add all other regular contri		5b.	Mandatory contributions for retirement plans	5b).	\$		_	\$			_
56. Required repayments of retirement fund loans 56. Issurance 56. Domestic support obligations 56. Insurance 56. S 0.000 \$ NAA 56. Union dues 57. Other deductions. Specify: 58. S 0.000 \$ NAA 58. Union dues 58. S 0.000 \$ NAA 59. Union dues 58. S 0.000 \$ NAA 59. Union dues 58. S 0.000 \$ NAA 59. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1,303.86 \$ NAA 70. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 4,369.21 \$ NAA 71. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 4,369.21 \$ NAA 72. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 4,369.21 \$ NAA 73. List all other income regularly receives 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.000 \$ NAA 8c. Social Security 8c. \$ 0.000 \$ NAA 8c. Social Security 8c. Other government assistance that you regularly receive 8c. \$ 0.000 \$ NAA 8c. Social Security 8c. Other government assistance Program) or housing subsidies. 8pecify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8c. Social Security 8c. Soci		5c.	Voluntary contributions for retirement plans	50	:.	\$	0.00	-	\$			_
55 Domestic support obligations 55 \$ \$ 0.00 \$ N/A		5d.	Required repayments of retirement fund loans	5d	١.	\$		_	\$		N/A	<u> </u>
5g, \$ 0.00		5e.	Insurance	5e	.	\$	0.00		\$		N/A	 \
5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$1,303.86 \$N/A 7. \$1,303.86 \$N/A 8. List all other income regularly received: 8. a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly receive income. See the regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. See the regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. See the regularly receive include cash assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8. Pension or retirement income 8. Social Security 8. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$0.00 \$N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$0.00 \$N/A 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$0.00 \$N/A 11. State all other income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. Pon out include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not in		5f.	Domestic support obligations	5f.		\$	0.00	_	\$		N/A	 \
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 4,369.21 \$ N/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 \$ 0.00 \$ N/A 10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 \$ 0.00 \$ N/A 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. \$ 4,369.21 Combined monthly income. 12. \$ 4,3		5g.	Union dues	5 g	J.	\$	0.00		\$		N/A	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm. Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Increast and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Ouher government assistance that you regularly receive Include assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (hendfits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$0.00 \$N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$0.00 \$N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$0.00 \$N/A 10. Calculate monthly income. Add line 7 + line 9. 11. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. 12. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. 12. \$4,369.21 \text{ Combined monthly income.} 13. Do you expect an increase or decrease within the year after you file this form?		5h.	Other deductions. Specify:	5h	1.+	\$	0.00	+	- \$		N/A	\
8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 0.000 \$ N/A 8h. Other monthly income. Specify: 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.000 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. 4dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. \$ 4,369.21	6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,303.86		\$		N/A	<u> </u>
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include allmony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8f. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. * \$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. * 4.369.21** **Combined monthly income**	7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	4,369.21	_	\$		N/A	<u>. </u>
receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$ 0.00 \$ N/A 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include allimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8e. Social Security 6f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. + \$ 0.00 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. + \$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No.	8.		Net income from rental property and from operating a business, profession, or farm									
8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8e. \$ 0.00 \$ N/A 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 8h. Other monthly income. Add line 7 + line 9. Add all other income. Add line 8 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. * * 0.00 12. * Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it with the summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it No.			receipts, ordinary and necessary business expenses, and the total									
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8e. \$ 0.00 \$ N/A 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 13. Do you expect an increase or decrease within the year after you file this form?			monthly net income.	8a	١.							
regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 13. Do you expect an increase or decrease within the year after you file this form?		8b.).	\$_	0.00		\$		N/A	<u>\</u>
8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$0.00 \$N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$0.00 \$N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Write that amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No.		8c.	regularly receive Include alimony, spousal support, child support, maintenance, divorce									
8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h. + \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 4,369.21								_				
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. + \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No.						· -		_	· —			_
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify: 8h.+ \$ 0.00 + \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income No.			•	86) .	\$_	0.00	_	\$		N/A	<u>\</u>
8g. Pension or retirement income 8h. Other monthly income. Specify: 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 4,369.21 Combined monthly income. No.		δī.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.			\$	0.00		\$		N/A	
8h. Other monthly income. Specify: 8h. \$ 0.00		8g.	Pension or retirement income	 8g	J.	\$			\$			
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 4,369.21 Combined monthly income No.		8h.	Other monthly income. Specify:			\$		_	\$			
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Do you expect an increase or decrease within the year after you file this form? No.	9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	(\$	0.00		\$		N/	A
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Do you expect an increase or decrease within the year after you file this form? No.				[_							
 State all other regular contributions to the expenses that you list in <i>Schedule J</i>. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i>. Specify: 11. +\$ 0.00 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities</i> and Related <i>Data</i>, if it applies 12. \$ 4,369.21 Combined monthly income No. 	10.		•	10.	\$ __		4,369.21 + \$	· —		N/A	= \$ _	4,369.21
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 13. Do you expect an increase or decrease within the year after you file this form? No.		Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	L								
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$\frac{4,369.21}{Combined monthly income}} No.	11.	Inclu othe Do i	ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	depe			•					0.00
13. Do you expect an increase or decrease within the year after you file this form? ■ No. monthly income	12.	Writ	e that amount on the Summary of Schedules and Statistical Summary of Certai							12.	\$	4,369.21
13. Do you expect an increase or decrease within the year after you file this form? No.												
	13.	Do	•	?								.,

Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main Document Page 33 of 58

-HII	in this informa	tion to identify yo	ur caca:							
Deb	otor 1	Rogdrick D W	ilson			Ch		f this is: amended filing		
Deb	otor 2							•	ving postpetition chapte	r
(Sp	ouse, if filing)						13	expenses as of	the following date:	
Unit	ted States Bankr	uptcy Court for the:	NORTH	ERN DISTRICT OF ILLIN	OIS		M	M / DD / YYYY		
1	se number									
(If k	nown)									
O ¹	fficial Fo	rm 106J								
S	chedule	J: Your E	Exper	ses					12	2/1
Be info	as complete a ormation. If m mber (if know	and accurate as	possible. eded, atta y question	If two married people and the control of the contro						
1.	Is this a joir									_
	■ No. Go to	o line 2. es Debtor 2 live i	n a senar	ate household?						
	□ N		n a sepan	ate nousenou.						
			t file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of De	ebtor	2.		
2.	Do you have	e dependents?	□ No							
	Do not list Do Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati			Dependent's age	Does dependent live with you?	
	Do not state	the							□ No	
	dependents				Daughter			10	Yes	
					Doughton			14	□ No	
					Daughter				■ Yes □ No	
									☐ Yes	
									□ No	
2	De veur evr	annon ingluda	_		-				☐ Yes	
3.		oenses include f people other th	nan	No						
	yourself and	d your depender	nts? ⊔	Yes						
Est	imate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp						
the		h assistance and		government assistance i cluded it on <i>Schedule I:</i> Y				Your expe	enses	
4.		or home owners! and any rent for the		ses for your residence. I r lot.	nclude first mortgage	e 4.	\$_		0.00	
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a.	\$		210.00	
		rty, homeowner's				4b.	_		300.00	
		maintenance, re owner's associati		ipkeep expenses		4c. 4d.	. –		50.00	
5.				oominium dues our residence, such as ho	me equity loans		\$ \$		0.00	

Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main Document Page 34 of 58

ebtor 1 _F	Rogdrick D Wilson	Case num	ber (if known)	
. Utilitie	s:			
	Electricity, heat, natural gas	6a.	\$	300.00
	Nater, sewer, garbage collection	6b.	· ·	150.00
	Felephone, cell phone, Internet, satellite, and cable services	6c.		80.00
	Other. Specify:	6d.	· -	0.00
	and housekeeping supplies	7.	*	549.21
	are and children's education costs	8.	·	
			·	0.00
	ng, laundry, and dry cleaning	9.	\$	130.00
	nal care products and services	10.		100.00
	al and dental expenses	11.	\$	0.00
	portation. Include gas, maintenance, bus or train fare.	12.	c	500.00
	include car payments.		· ·	
	ainment, clubs, recreation, newspapers, magazines, and books	13.		0.00
	able contributions and religious donations	14.	\$	0.00
. Insura				
	include insurance deducted from your pay or included in lines 4 or 20.	45-	Ф	400.00
	ife insurance	15a.	·	100.00
	Health insurance	15b.	·	0.00
	/ehicle insurance	15c.	· -	150.00
	Other insurance. Specify:	15d.	\$	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.		_	
Specify		16.	\$	0.00
	ment or lease payments:			
	Car payments for Vehicle 1	17a.	*	0.00
17b. (Car payments for Vehicle 2	17b.	\$	0.00
17c. (Other. Specify:	17c.	\$	0.00
17d. (Other. Specify:	17d.	\$	0.00
. Your p	ayments of alimony, maintenance, and support that you did not report as	<u> </u>		
	ted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
	payments you make to support others who do not live with you.		\$	0.00
Specify	<i>r</i> :	19.		
. Other	real property expenses not included in lines 4 or 5 of this form or on Scho	edule I: Yo	our Income.	
	Mortgages on other property	20a.		0.00
20b. F	Real estate taxes	20b.	\$	0.00
20c. F	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	Maintenance, repair, and upkeep expenses	20d.	·	0.00
	Homeowner's association or condominium dues	20e.	·	0.00
. Other:		21.	·	
	· · · · · · · · · · · · · · · · · · ·			20.00
Books	/Supplies/Tuition for dependents		+\$	100.00
. Calcul	ate your monthly expenses			
	dd lines 4 through 21.		\$	2,739.21
	opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	2,700.21
				0.700.04
∠∠c. Ac	dd line 22a and 22b. The result is your monthly expenses.		\$	2,739.21
Calcul	ate your monthly net income.		L	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,369.21
	Copy your monthly expenses from line 22c above.	23b.		2,739.21
200.	John Marking Oxposition and 220 above.	200.		2,133.21
23c. S	Subtract your monthly expenses from your monthly income.			
	The result is your <i>monthly net income</i> .	23c.	\$	1,630.00
For example and the control of the c	u expect an increase or decrease in your expenses within the year after youngle, do you expect to finish paying for your car loan within the year or do you expect you tion to the terms of your mortgage?			e or decrease because of
■ No.	[=			
☐ Yes	Explain here:			

Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main Document Page 35 of 58

Fill in this info	rmation to identify your	case:			
Debtor 1	Rogdrick D Wilson				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official For Declara		n Individual	Debtor's Sc	hedules	12/15
if two married p	eople are filing togethe	r, both are equally respo	nsible for supplying cor	rect information.	
obtaining mone		n connection with a banl			ent, concealing property, or or imprisonment for up to 20
Sig	gn Below				
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankru	uptcy Petition Preparer's Notice,
				Declaration, a	and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules file	d with this declaration	and
X /s/ Ro	gdrick D Wilson		X		
	rick D Wilson		Signature of	Debtor 2	
	ure of Debtor 1		- 3		

Date

Date September 18, 2018

Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main Document Page 36 of 58

		nation to identify you								
Deb	otor 1	Rogdrick D Wilso First Name	N Middle Name	Last Name						
	otor 2									
(Spo	use if, filing)	First Name	Middle Name	Last Name						
Unit	ted States Bar	kruptcy Court for the:	NORTHERN DISTRICT O	OF ILLINOIS						
Case number					_	Check if this is an				
Sta Be a	s complete a	of Financial	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for sup additional pages, write you					
Par	t 1: Give D	etails About Your Ma	rital Status and Where You	Lived Before						
1. What is your current marital status?										
	☐ Married ■ Not marr	ried								
2. During the last 3 years, have you lived anywhere other than where you live now?										
	■ No □ Yes. List	s. List all of the places you lived in the last 3 years. Do not include where you live now.								
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
	es and territorie	es include Arizona, Ca		vada, New Mexico, Puerto Ri	ity property state or territor co, Texas, Washington and V					
Par	t 2 Explain	n the Sources of You	r Income							
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?				
	□ No ■ Yes. Fill	in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
From January 1 of current year until the date you filed for bankruptcy:			■ Wages, commissions, bonuses, tips	\$38,198.02	☐ Wages, commissions, bonuses, tips					
			☐ Operating a business		☐ Operating a business					

Official Form 107

Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main Document

Page 37 of 58 Case number (if known) Debtor 1 Rogdrick D Wilson

				Debtor 1			Dobtos 2		
							Debtor 2		
		Sources of income Check all that apply.	Gross i (before exclusion	deductions and	Sources of in Check all that		Gross income (before deductions and exclusions)		
	or last calen anuary 1 to		31, 2017)	■ Wages, commissions, bonuses, tips		\$11,974.00	☐ Wages, co bonuses, tips	mmissions,	
				☐ Operating a business			☐ Operating	a business	
	or the calend anuary 1 to			■ Wages, commissions, bonuses, tips		\$46,376.00	☐ Wages, co bonuses, tips	mmissions,	
				☐ Operating a business			☐ Operating	a business	
	and other winnings. List each s	public benet f you are fili	it payments; ng a joint cas he gross inco	er that income is taxable. Exa pensions; rental income; inter se and you have income that y sme from each source separa	rest; divide you receive	nds; money collected together, list it of	cted from lawsuits only once under [s; royalties; and Debtor 1.	
				Debtor 1			Debtor 2		
				Sources of income Describe below.	each so	deductions and	Sources of in Describe belo		Gross income (before deductions and exclusions)
	or last calen anuary 1 to		31, 2017)	Unemployment		\$5,090.00			
De	rt 3: List	Cortain Ba	umonte Vou	Made Before You Filed for	Bankrupto	A.			
6.	-		-	's debts primarily consume	-	y			
υ.	□ No.	Neither De	ebtor 1 nor D	personal, family, or household	umer debts		ts are defined in 1	1 U.S.C. § 10	1(8) as "incurred by an
		During the No.	90 days befo	re you filed for bankruptcy, di	id you pay	any creditor a tota	al of \$6,425* or m	ore?	
		□ Yes	paid that cr	each creditor to whom you pai editor. Do not include paymer payments to an attorney for the	nts for dom	estic support obli			
		* Subject		on 4/01/19 and every 3 year			or after the date	of adjustment	
	Yes.			r both have primarily consure you filed for bankruptcy, di			al of \$600 or more	∍ ?	
		■ No.	Go to line 7						
		☐ Yes	include pay	each creditor to whom you pai ments for domestic support o this bankruptcy case.					
	Creditor'	s Name and	d Address	Dates of payme	ent	Total amount	Amount you still owe	Was this p	payment for

Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main Document Page 38 of 58

Document Page 38 of 58 ase number (*if known*) Debtor 1 Roadrick D Wilson Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Reason for this payment Dates of payment **Total amount** Amount you still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο П Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

per person

Address:

Describe the gifts

Value

Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600

Person to Whom You Gave the Gift and

Dates you gave the gifts Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main

Del	ebtor 1 Rogdrick D Wilson	Docur	ment	Page 39 of 58 Case number	er (if known)	
	Trogation D Wildon					
14.	Within 2 years before you filed for ba ■ No □ Yes. Fill in the details for each gift		give any g	gifts or contributions with a to	otal value of more than	\$600 to any charity?
	Gifts or contributions to charities th more than \$600 Charity's Name Address (Number, Street, City, State and ZIP	at total Descr	ibe what y	you contributed	Dates you contributed	Value
Pa 15.	or gambling?	skruptcy or since y	ou filed fo	or bankruptcy, did you lose ar	nything because of the	ft, fire, other disaster
	■ No□ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include the am	ount that ir	coverage for the loss nsurance has paid. List pending 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	rt 7: List Certain Payments or Trans					
	consulted about seeking bankruptcy Include any attorneys, bankruptcy petition No Yes. Fill in the details.	on preparers, or cre	dit counse	ling agencies for services requi	red in your bankruptcy.	
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if N	transf		d value of any property	Date payment or transfer was made	Amount of payment
	STAHULAK & ASSOCIATES, L.L. 53 W. Jackson Blvd., Suite 652 Chicago, IL 60604	C \$650.	.00 (\$310 30.00 atty	.00 filing fee + \$10.00 copy s fees)	3/23/18	\$650.00
	Green Path Debt Solutions 38505 Country Club Drive Farmington, MI 48331	+g		3/27/18	\$35.00	
	STAHULAK & ASSOCIATES, L.L. 53 W. Jackson Blvd., Suite 652 Chicago, IL 60604		.00 (\$310 30.00 atty	.00 filing fee + \$10.00 copy s fees)	9/8/18-9/14/18	\$650.00
17.	Within 1 year before you filed for bar promised to help you deal with your Do not include any payment or transfer	creditors or to mak	ce paymer	else acting on your behalf pa nts to your creditors?	y or transfer any prope	erty to anyone who

No

 \square Yes. Fill in the details.

Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made

Entered 09/18/18 17:12:45 Desc Main Case 18-26303 Doc 1 Filed 09/18/18 Page 40 of 58
Case number (if known) Document

Debtor 1 Rogdrick D Wilson

8.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.							
	Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and v property transfer		payme	ibe any property or ents received or debts n exchange	Date transfer was made		
	Person's relationship to you							
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)							
	No Yes. Fill in the details.							
	Name of trust	Description and v	alue of the pro	perty trans	sferred	Date Transfer was made		
Dat	4 S. List of Contain Financial Associate In	estrumento. Cofo Donocit	Davas and C	larana Unit				
Fal	t 8: List of Certain Financial Accounts, In	istruments, Sale Deposit	boxes, and Si	torage Unit	S			
20.	Within 1 year before you filed for bankrupto	cy, were any financial ac	counts or instr	uments he	ld in your name, or for yo	our benefit, closed,		
	sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.							
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument		Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?							
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?		
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?							
	■ No							
	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)				Do you still have it?		
Dat	t 9: Identify Property You Hold or Control	l for Compone Floo						
rai	t 9: Identify Property You Hold or Control	i ioi Someone Eise						
23.	Do you hold or control any property that so for someone.	omeone else owns? Inclu	ude any proper	ty you borr	rowed from, are storing f	or, or hold in trust		
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value		
Par	t 10: Give Details About Environmental Inf	formation						
								
-or	the purpose of Part 10, the following definiti	ions apply:						

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5 Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main Page 41 of 58 Case number (if known) Document

Debtor 1 Rogdrick D Wilson

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	hazardous material, pollutant, contaminant, or similar term.									
Rep	Report all notices, releases, and proceedings that you know about, regardless of when they occurred.									
24.	Has	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
		No								
	_	Yes. Fill in the details.								
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	t	Environmental law, if you know it	Date of notice				
25.	Hav	Have you notified any governmental unit of any release of hazardous material?								
	■ No □ Yes. Fill in the details.									
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it		Date of notice				
26.	Hav	re you been a party in any judicial or adn	ninistrative proceeding under any envi	ronn	nental law? Include settlements a	nd orders.				
		No Yes. Fill in the details.								
	Case Title Case Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case				
Par	t 11:	Give Details About Your Business or	Connections to Any Business							
		_		v of	the following connections to any	husiness?				
27.	VVIL	hin 4 years before you filed for bankrupt A sole proprietor or self-employed ii	• •	-	•	DUSINESS !				
		☐ A member of a limited liability comp			-					
		☐ A partner in a partnership	any (220) or miniou habitity parational	.p (=	- . ,					
		☐ An officer, director, or managing exc	ecutive of a corporation							
		☐ An owner of at least 5% of the voting	·							
		No. None of the above applies. Go to F								
	_	Yes. Check all that apply above and fill		.						
	Bu	siness Name	Describe the nature of the business	-	Employer Identification number					
	Address (Number, Street, City, State and ZIP Code)		Name of accountant or bookkeeper		Do not include Social Security number or ITIN.					
	Dates business existed									
28.		hin 2 years before you filed for bankrupt citutions, creditors, or other parties.	cy, did you give a financial statement t	o an	yone about your business? Inclu	de all financial				
		No								
		Yes. Fill in the details below.								
	Name Address (Number, Street, City, State and ZIP Code)									
_	_									

Part 12: Sign Below

Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Page 42 of 58 Case number (if known) Document

Debtor 1 Rogdrick D Wilson

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Rogdrick D Wilson Signature of Debtor 2 Rogdrick D Wilson

Date September 18, 2018 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Signature of Debtor 1

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
 - Debtor's attorney received \$650.00 from Debtor(s) prior to filing of the case as an advanced payment in compensation of (1) analysis of financial situation; (2) consultation on various bankruptcy and non-bankruptcy options; (3) preparation of documents; (4) payment of filing fees; and, when applicable (5) payment of costs of credit report fees.
 - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$330.00 toward the flat fee, leaving a balance due of \$3,670.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: September 18, 2018					
Signed:					
/s/ Rogdrick D Wilson	/s/ Thomas G. Stahulak				
Rogdrick D Wilson	Thomas G. Stahulak 6288620				
	Attorney for the Debtor(s)				
Debtor(s)					
Do not sign this agreement if the amounts are l	olank.				

Local Bankruptcy Form 23c

Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main Document Page 53 of 58

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In r	e Rogdrick D Wilson		Case No.	
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENSATI	ION OF ATTORN	EY FOR DE	CBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I cercompensation paid to me within one year before the filing of the be rendered on behalf of the debtor(s) in contemplation of or in c	petition in bankruptcy, or a	greed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	4,000.00
	Prior to the filing of this statement I have received		\$	330.00
	Balance Due		\$	3,670.00
2.	\$_310.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed compensation	with any other person unle	ess they are memb	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with copy of the agreement, together with a list of the names of the			
6.	In return for the above-disclosed fee, I have agreed to render legal	al service for all aspects of	the bankruptcy c	ase, including:
	 a. Analysis of the debtor's financial situation, and rendering adv b. Preparation and filing of any petition, schedules, statement of c. Representation of the debtor at the meeting of creditors and co d. [Other provisions as needed] Negotiations with secured creditors to reduce to ma agreements and applications as needed; preparation of liens on household goods. 	affairs and plan which may onfirmation hearing, and ar arket value; exemption p	y be required; ny adjourned hear lanning; prepara	rings thereof; ation and filing of reaffirmation
7.	By agreement with the debtor(s), the above-disclosed fee does no Representation of the debtors in any dischargeability adversary proceeding.	t include the following ser ty actions, judicial lien a	vice: voidances, relie	f from stay actions or any other
	CERT	TIFICATION		
this	I certify that the foregoing is a complete statement of any agreement of any agreement of the proceeding.	ent or arrangement for pay	ment to me for re	epresentation of the debtor(s) in
	September 18, 2018	/s/ Thomas G. Stahula	ık	
_	Date	Thomas G. Stahulak 6		
		Signature of Attorney Stahulak & Associates	STIC / CotEil	lod
		53 W. Jackson Blvd., S		leu
		Chicago, IL 60604		
		(312) 662-1480 Fax:	,	
		ecf@stahulakandasso Name of law firm	ciates.com	

Case 18-26303 Doc 1 Filed 09/18/18 Entered 09/18/18 17:12:45 Desc Main Document Page 54 of 58

United States Bankruptcy Court Northern District of Illinois

In re	Rogdrick D Wilson		Case No.	
		Debtor(s)	Chapter	13
	VEF	RIFICATION OF CREDITOR MA	ATRIX	
		Number of C	Creditors:	35
	The above-named Debtor(s) h (our) knowledge.	hereby verifies that the list of credito	ors is true and c	correct to the best of my
Date:	September 18, 2018	/s/ Rogdrick D Wilson Rogdrick D Wilson Signature of Debtor		

American InfoSource LP PO Box 71083 Charlotte, NC 28272

American InfoSource LP as agent for DIRECTV, LLC PO Box 51178 Los Angeles, CA 90051

Antero Capital LLC PO BOX 1931 Burlingame, CA 94011

Arnold Scott Harris, P.C. 111 W Jackson Blvd, Suite 600 Chicago, IL 60604

Cambridge Capital Solution 28241 Crown Valley Pkwy Ste F403 Laguna Niguel, CA 92677

Capital One Bank PO Box 6492 Carol Stream, IL 60197

Chase Bank National Payment Services PO BOX 182223- Dept OH1-1272 Columbus, OH 43218

Chicago Department of Revenue 121 N. Lasalle Street Room 107A Chicago, IL 60602

Chrysler Capital PO BOX 961278 Fort Worth, TX 76161

City of Chicago Department of Rev - Water Division P.O. Box 6330 Chicago, IL 60680 City of Chicago *
Department of Finance
P.O Box 88292
Chicago, IL 60680-1292

City of Chicago Dept of Revenue Wat 333 S. State St. #330 PO Box 6330 Chicago, IL 60680

Commonwealth Edison 1919 SWIFT DR CLAIMS & COLLECTIONS Oak Brook, IL 60523

Directv PO BOX 9001069 Louisville, KY 40290

Enterprise Rent-A-Car PO BOX 405738 Atlanta, GA 30384

Ford Credit
Bankruptcy Dept
P.O. Box 542000
Omaha, NE 68154-8000

Goldman and Grant 205 W Randolph Chicago, IL 60606

Harris & Harris 600 W. Jackson Blvd #400 Chicago, IL 60661

IL Dept of Employment Security 33 S State St 8th Flr Benefit Payment Control Chicago, IL 60603

IL Dept of Employment Security PO Box 4385 Chicago, IL 60680

IL Dept of Employment Security PO Box 19509 Springfield, IL 62794

IL Dept of Employment Security 28542 NETWORK PL Chicago, IL 60673

Internal Revenue Service PO Box 7317 Central Insolvency Operations Philadelphia, PA 19101-7346

Internal Revenue Service
PO Box 7346 *
Philadelphia, PA 19101

Linebarger Goggan Blair & Sampson PO Box 06152 Chicago, IL 60606

MIDLAND FUNDING□ PO BOX 2011 Warren, MI 48090

Northwestern Hospital 251 E. Huron Chicago, IL 60611

Northwestern Medical 38693 Eagle Way Chicago, IL 60678

People's Gas Light & Coke 200 E Randolph St Chicago, IL 60601

PRA Receivables Management, LLC PO BOX 12914 Norfolk, VA 23541

Secretary of State Compliance Dept 2701 S Dirksen Pkwy Springfield, IL 62723 St Anthony Hospital 2875 West 19th Street Chicago, IL 60623

T-Mobile/T-Mobile USA INC %American Infosource LP PO Box 248848 Oklahoma City, OK 73124

University Eye Specialists 676 N St Clair, Ste 1500 Chicago, IL 60611

USA Title Loans/Title Lenders 790 Estate Dr, Suite 100 Deerfield, IL 60015